

Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

Type or print in ink.

FILED
Date Stamp
FEB 21 2002
REGISTRAR OF VOTERS
By Charles Deputy
CALIFORNIA 2001/02 FORM 460
Page 1 of 67
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☒ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee
☐ Primarily Formed
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
- ☐ Primarily Formed Candidate/
Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☒ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER 1237231

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Norby for Supervisor

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

714-871-9756

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Michael DiCostanzo

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

714-529-9445

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on February 21, 2002
Date

Executed on February 21, 2002
Date

Executed on _____
Date

Executed on _____
Date

By Michael DiCostanzo
Signature of Treasurer or Assistant Treasurer

By Chris Norby
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM 460

Page 2 of 67

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Chris Norby

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

County Supervisor, Orange County District #4

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME

Friends of Chris Norby

I.D. NUMBER

831657

NAME OF TREASURER

CONTROLLED COMMITTEE?

☒ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

714-871-9756

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby For Supervisor

Statement covers period
from 1/20/02
through 2/16/02

CALIFORNIA
FORM **460**

Page 3 of 67

I.D. NUMBER
1237231

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL ODATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>76,211</u>	\$ <u>102,936</u>
2. Loans Received Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>76,211</u>	\$ <u>102,936</u>
4. Nonmonetary Contributions Schedule C, Line 3	\$ <u>2,000</u>	\$ <u>3,000</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>78,211</u>	\$ <u>105,936</u>

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

1/1 through 6/30 7/1 to Date

20. Contributions Received \$ _____ \$ _____
21. Expenditures Made \$ _____ \$ _____

Expenditures Made

6. Payments Made Schedule E, Line 4	\$ <u>117,295</u>	\$ <u>136,216</u>
7. Loans Made Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>117,295</u>	\$ <u>136,216</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$ <u>15,700</u>	\$ <u>15,700</u>
10. Nonmonetary Adjustment Schedule C, Line 3	\$ <u>2,000</u>	\$ <u>3,000</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>134,995</u>	\$ <u>154,916</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) Total to Date

_____/_____/_____ \$ _____
_____/_____/_____ \$ _____
_____/_____/_____ \$ _____
_____/_____/_____ \$ _____
_____/_____/_____ \$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ <u>64,084</u>
13. Cash Receipts Column A, Line 3 above	\$ <u>76,211</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$ <u>0</u>
15. Cash Payments Column A, Line 8 above	\$ <u>117,295</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>23,000</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from Jan. 20, 2002
through Feb. 16, 2002

SCHEDULE A
CALIFORNIA FORM **460**

Page 4 of 67

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby for Supervisor

I.D. NUMBER

1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$						

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 70,160
- Amount received this period – unitemized contributions of less than \$100 \$ 6,051
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 76,211

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A
Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from Jul 20, 2002
through Feb 16, 2002

CALIFORNIA
FORM **460**

Page 5 of 67

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Noray for Supervisor

I.D. NUMBER
1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2002	A.J. Kirkwood & Associates, Inc. [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000	\$1,000	\$1,000
1/25/2002	Ms. Abigail Alderman [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/13/2002	Mr. W.R. Allan [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Roy Allen Slurry Seal	\$750	\$750	\$750
2/10/2002	Mr. Jerry Amante [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Amante & Shaffer, LLP	\$100	\$100	\$100
1/22/2002	Anaheim Eye Medical Group [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$200	\$200	\$200
SUBTOTAL \$ <u>2,150</u>				<u>2,150</u>	<u>2,150</u>	

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period – unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>6</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/6/2002	Mr. Thomas Scot Armour [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$100	\$100	\$150
1/25/2002	Mr. Wayne Baglin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Baglin Real Estate	\$100	\$100	\$100
2/15/2002	Beverly Bailey [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President & CEO Stronghold Engineering	\$150	\$150	\$150
2/1/2002	Mr. George Barton [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$150
2/12/2002	Mr. Robert Bean [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$250	\$250
SUBTOTAL \$ <u>700</u>				<u>700</u>	<u>800</u>	

***Contributor Codes**

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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>7</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/31/2002	Mr. David Bell [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer Toshiba America	\$25	\$25	\$100
1/25/2002	Mr. Lori Belski [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IT Manager Ingram Micro	\$50	\$50	\$150
1/24/2002	Ms. Dorothy Benford [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000	\$1,000	\$1,000
1/24/2002	Ms. Jenny Benford [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Student Law School	\$1,000	\$1,000	\$1,000
1/24/2002	Mr. Raymond Benford [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President California Mortgage Service	\$1,000	\$1,000	\$1,000
SUBTOTAL \$ <u>3,075</u>				<u>3,075</u>	<u>3,250</u>	

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 (other than PTY or SCC)
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 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>8</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2002	Mrs. Barbara Benner [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$200
2/15/2002	Mr. Larry Bennett [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Speech Pathologist Ocean View School District	\$50	\$100	\$150
2/12/2002	Mrs. Ernestina Benson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Interpreter Self-Employed	\$100	\$100	\$150
1/29/2002	Mr. Dennis Berryman [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Developer Pacific Drive Group	\$100	\$100	\$200
1/31/2002	Mrs. Karol Biggar [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
SUBTOTAL \$ <u>450</u>				<u>500</u>	<u>800</u>	

***Contributor Codes**

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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>9</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/15/2002	Mr. Robert Bishop [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Network Telecom Superior Court	\$250	\$250	\$1,000
1/29/2002	Mr. Bertram Black [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
1/30/2002	Mr. Ben Blount [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
1/25/2002	Ms. Cleo Bluth [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor Self-Employed	\$500	\$500	\$500
1/29/2002	Mr. James Bragg [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$100	\$200
SUBTOTAL \$ <u>900</u>				<u>950</u>	<u>1,900</u>	

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 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>16</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/2/2002	Mr. Benjamin Braun [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect JBZ Architects & Planners	\$200	\$200	\$400
1/25/2002	Mr. Dan Brothman [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Western Medical Group	\$300	\$300	\$300
2/13/2002	Mr. Craig Brown [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Developer Senior Care Industries	\$100	\$100	\$100
1/29/2002	Mr. Arthur Bruington [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Civil Engineer Retired	\$100	\$200	\$200
2/4/2002	Mr. Louis Brutocao [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Developer Brutocao Company	\$500	\$500	\$1,000
SUBTOTAL \$ <u>1,200</u>				<u>1,300</u>	<u>2,000</u>	

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 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>11</u> of <u>67</u> I.D. NUMBER 1237231
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NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/31/2002	Mr. Rudolf Brutoco [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Lifestages Center for Dev. Medicine	\$500	\$500	\$500
2/10/2002	Mr. Mark Bucher [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Employers Resource	\$1,000	\$1,000	\$1,000
2/11/2002	Mrs. Marjorie Carnahan [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owners Investment Development Management	\$100	\$100	\$100
1/25/2002	Ms. Janeth Carpenter [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/5/2002	Mr. Joseph Carruth [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
SUBTOTAL \$ <u>1,750</u>				<u>1,750</u>	<u>1,800</u>	

***Contributor Codes**

IND - Individual
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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>12</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/24/2002	Dan Caskey [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Carter & Burgess, Inc	\$500	\$500	\$500
2/10/2002	Mr. Ronald Cedillos [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Managing Partner Sierra Partners LLC	\$1,000	\$1,000	\$1,000
2/4/2002	Mrs. Judy Cerney [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Technician Conexant	\$25	\$25	\$175
2/13/2002	Mr. Ray Chafe [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Sunwest Electric Inc.	\$1,000	\$1,000	\$1,000
2/16/2002	Mr. Stan Chen [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineering & Management Arborland	\$100	\$100	\$100
SUBTOTAL \$ <u>2,625</u>				<u>2,625</u>	<u>2,775</u>	

*Contributor Codes

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 (other than PTY or SCC)
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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>13</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2002	Mr. William Christie [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
1/29/2002	Mr. Pasquale Clemente [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Importer Self-Employed	\$100	\$100	\$250
1/29/2002	Ms. Grace Clifford [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$150
2/11/2002	Mrs. Barbara Conrad [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$200	\$200	\$200
1/25/2002	Conservative Women's Leadership (ID# 1237244) [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000	\$1,000	\$1,000
SUBTOTAL \$ <u>1,500</u>				<u>1,500</u>	<u>1,700</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>14</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2002	Ms. Elaine Cook [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$150
2/11/2002	Mr. Frank Cornell [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Self-Employed	\$100	\$100	\$100
2/4/2002	Mr. Brian Daily [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Strategic Planner Corinthian College	\$100	\$100	\$200
1/31/2002	Mr. Anthony Dallendorfer [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$150	\$450
2/9/2002	Mr. Brent Danninger [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$550	\$550	\$1,000
SUBTOTAL \$ <u>900</u>				<u>1,000</u>	<u>1,900</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>15</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/25/2002	Mr. John Davis [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200	\$200	\$200
1/31/2002	Mr. Felipe Delgado [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Elec. Designer Fluor Daniel	\$50	\$80	\$138
2/15/2002	Mrs. Lisa DePaul-Snyder [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Unemployed	\$100	\$100	\$100
2/11/2002	Ms. Diane Dimaria [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Self-Employed	\$500	\$500	\$500
2/11/2002	Mr. Carol Disylvestrer [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
SUBTOTAL \$ <u>950</u>				<u>980</u>	<u>1,038</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>16</u> of <u>67</u>
I.D. NUMBER 1237231		

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2002	Mr. William Dohr [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Sterling Homes Corp	\$1,000	\$1,000	\$1,000
1/25/2002	Mrs. Margaret Donner [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Self-Employed	\$190	\$190	\$190
2/11/2002	Mr. Thomas Durkin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/12/2002	Mr. Donald Emde [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Publisher Self-Employed	\$100	\$100	\$100
2/8/2002	Encompass Services [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000	\$1,000	\$1,000
SUBTOTAL \$ <u>2,390</u>				<u>2,390</u>	<u>2,390</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>17</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/6/2002	Mrs. Annette Fadness [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$250	\$250	\$400
2/12/2002	Mr. Samuel Farina [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Office of Hearing & Appeals	\$50	\$100	\$100
2/10/2002	Mr. James Femino [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000	\$1,000	\$1,000
2/11/2002	Ms. Diane Ferguson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$150
1/29/2002	Mrs. MaryAnn Finley [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200	\$300	\$500
SUBTOTAL \$ <u>1,600</u>				<u>1,750</u>	<u>2,150</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460
Page <u>18</u> of <u>67</u>		
NAME OF FILER Norby for Supervisor		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/15/2002	Mr. Mark Fisher [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Newport Beach	\$100	\$100	\$200
2/6/2002	Mr. Hollis Fitz [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Carpenter Self-Employed	\$200	\$400	\$500
2/1/2002	Ms. Billie Jean Flemins [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$125
2/6/2002	Mr. Eric Floe [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Boeing	\$100	\$100	\$100
1/31/2002	Mrs. Linda Foresta [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$250	\$250
SUBTOTAL \$ <u>700</u>				<u>900</u> <u>1,175</u>		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>19</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2002	Ms. Teresa Forrest [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Wholesale Lender Homecomings Financial	\$100	\$100	\$200
2/5/2002	Mr. Sean Francis [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Hub Café	\$300	\$300	\$300
2/2/2002	Mr. James Fujimoto [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Treasurer Noritsu	\$50	\$50	\$150
1/21/2002	Fullerton Police Officers PAC (ID#943753) [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000	\$1,000	\$1,000
1/25/2002	Mr. F.O. Gardner [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Foam Promoting Co, Inc	\$500	\$500	\$500
SUBTOTAL \$ <u>1,950</u>				<u>1,950</u>	<u>2,150</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period
 from Jan. 20, 2002
 through Feb. 16, 2002

CALIFORNIA
 FORM **460**

Page 20 of 67

NAME OF FILER

Norby for Supervisor

I.D. NUMBER

1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2002	Mr. Darryl Gibson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Experian	\$50	\$50	\$250
2/13/2002	Mr. Lawrence Gilbert [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Biz Executive The Powerhouse, Inc.	\$75	\$75	\$175
2/10/2002	Mrs. Sally Gipple [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager G & H Holdings	\$1,000	\$1,000	\$1,000
1/20/2002	Mrs. Robin Glenn [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Franchise Law Team	\$100	\$100	\$600
2/10/2002	Mr. Steven Godbey [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Southwets Inspection & Testing Co.	\$1,000	\$1,000	\$1,000

SUBTOTAL \$ 2,225 2,225 3,025

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period
 from Jan. 20, 2002
 through Feb. 16, 2002

CALIFORNIA
FORM 460

Page 21 of 67

NAME OF FILER

Norby for Supervisor

I.D. NUMBER

1237231

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2/13/2002	Mr. Edward Gogin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Certified Public Accountant Self-Employed	\$150	\$150	\$350
1/29/2002	Mr. Allan Goldberg [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineering Manager The Toro Company	\$75	\$75	\$100
2/7/2002	Mr. John Goldsmith [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pilot Fed Ex	\$50	\$50	\$150
2/16/2002	Mr. Lloyd Gomez [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$150
1/31/2002	Mr. Edward Gotschall [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CFO New Century	\$500	\$500	\$500
SUBTOTAL \$ <u>825</u>				<u>825</u> <u>1250</u>		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>22</u> of <u>67</u>
NAME OF FILER Norby for Supervisor		
		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2002	Mrs. Charlotte Graham [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$100
2/2/2002	Mr. & Mrs. Gene & Ann Greco [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Capital Sales inc	\$25	\$50	\$100
2/10/2002	Hardy & Harper [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000	\$1,000	\$1,000
2/5/2002	Mrs. Diane Hassey [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Lantronix	\$100	\$100	\$200
2/4/2002	Mr. William Henderson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$100	\$100
SUBTOTAL \$ <u>1,275</u>				<u>1,350</u>	<u>1,500</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>23</u> of <u>67</u> I.D. NUMBER 1237231
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NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/12/2002	Mr. Peter Hersh [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Self-Employed	\$100	\$100	\$100
2/5/2002	Mr. Wayne Herzig [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$200	\$200
2/11/2002	Mrs. Susan Hess [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Capo Unified School District	\$500	\$500	\$500
2/10/2002	Mrs. Susan Hinman [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Municipal Water District of OC	\$100	\$100	\$100
2/11/2002	Mr. Daniel Hodes [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Lopez, Hodes, et el	\$100	\$100	\$100
SUBTOTAL \$ <u>900</u>				<u>1,000</u>	<u>1,000</u>	

***Contributor Codes**

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 (other than PTY or SCC)
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 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>	CALIFORNIA FORM 460
Page <u>24</u> of <u>67</u>	I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/8/2002	Mr. Myron Holburt [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
1/29/2002	Mr. David Holmes [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer Self-Employed	\$100	\$100	\$200
2/16/2002	Mr. Richard Howell [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer Unemployed	\$100	\$100	\$200
2/5/2002	Mrs. Kathleen Hublitz [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Broadcom Corp	\$100	\$100	\$150
2/5/2002	Mr. William Hulsy [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$100	\$100	\$100
SUBTOTAL \$ <u>450</u>				<u>450</u>	<u>750</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>25</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/25/2002	Mr. Anthony Hummel [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
2/5/2002	Mr. Glenn Humphrey [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500	\$500	\$500
2/12/2002	Ms. Diana Hurt [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Medical Transcriber Self-Employed	\$50	\$50	\$100
2/7/2002	Hydr-O-Seal [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500	\$500	\$500
2/1/2002	Mrs. Sheila Inserra [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$50	\$50	\$150
SUBTOTAL \$ <u>1,200</u>				<u>1,200</u>	<u>1,450</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>26</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/4/2002	Mr. Patrick Jackson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$250
2/8/2002	Mrs. Barbara Jay [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Self-Employed	\$100	\$100	\$150
1/24/2002	Mrs. Rola Jneid [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President Novel Corporation	\$250	\$250	\$250
2/11/2002	Mr. Richard Jodzio [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Frontline Company	\$100	\$100	\$150
2/13/2002	Mr. Fred Johnston [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$250	\$250
SUBTOTAL \$ <u>800</u>				<u>800</u>	<u>1,050</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>27</u> of <u>67</u>
NAME OF FILER Norby for Supervisor		
		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2002	Mr. Joie Jones [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor UCI	\$200	\$200	\$200
2/16/2002	Mrs. Kitty Jones [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Self-Employed	\$500	\$500	\$500
1/25/2002	Mr. Linda Joseph [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$500	\$500	\$500
2/5/2002	Mr. Michael Joyce [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
1/25/2002	Mrs. Marilyn Kane [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$100
SUBTOTAL \$ <u>1,400</u>				<u>1,400</u>	<u>1,400</u>	<u>1,400</u>

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>28</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2002	Mr. Benjamin Kaplan [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/11/2002	Mr. Michael Kartonis [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Dymanic Fab, Inc.	\$100	\$100	\$100
1/29/2002	Mr. Ned Kassouf [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
2/10/2002	Mr. Keys Keel [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$100	\$100	\$100
1/29/2002	Mrs. Arlene Kern [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrative Assistant Lundstrom & Assoc.	\$50	\$50	\$100
SUBTOTAL \$ <u>400</u>				<u>400</u>	<u>600</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>29</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/2/2002	Mrs. Cheryl Kinsman [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CPA Kinsman & Kinsman	\$100	\$100	\$100
1/22/2002	Mr. Eric Knirk [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Self-employed	\$200	\$200	\$200
1/29/2002	Mr. Oliver Kolstoe [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
2/6/2002	Mr. Leonard Kranser [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$250	\$350
1/22/2002	Mr. Tristan Krogus [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$200	\$200	\$300
SUBTOTAL \$				850	850	1,150

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>30</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/24/2002	Ms. Cecelia Lance [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/5/2002	Mrs. Laurene Langer [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$300
2/3/2002	Mr. Jaques Laufer [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Legal Consultant Hewitt Associates	\$50	\$50	\$100
2/10/2002	Mrs. Doris Lawson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/13/2002	Mr. John Paul Ledesma [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Product Manager BMI	\$100	\$100	\$100
SUBTOTAL \$ <u>450</u>				<u>450</u>	<u>700</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460
Page <u>31</u> of <u>67</u>		
NAME OF FILER Norby for Supervisor		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/2/2002	Mr. Alfred Lee [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pharmacist Western Medical Center	\$200	\$200	\$300
2/5/2002	Mrs. Constance Lee [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manufacturer's Rep Self-Employed	\$250	\$250	\$250
1/27/2002	Mr. Jim Lenthall [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$250	\$350
2/13/2002	Mr. David Levine [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dentist Self-Employed	\$100	\$100	\$100
2/13/2002	Mr. William Levinson [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$150	\$150
SUBTOTAL \$ <u>850</u>				<u>950</u>	<u>1,150</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460
Page <u>32</u> of <u>67</u>		
NAME OF FILER Norby for Supervisor		I.D. NUMBER 1237231

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1/31/2002	Mr Howard Lewis [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250	\$500	\$1,000
2/10/2002	Mr. Wayne Lindholm [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President Hensel Phelps Construction	\$1,000	\$1,000	\$1,000
2/5/2002	Mrs. Barbara Link [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Capo Unified	\$100	\$100	\$100
2/5/2002	Mr. Harvey Liss [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer VLSystems, Inc.	\$100	\$100	\$100
2/2/2002	Long Beach Roofing [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100	\$100	\$100
SUBTOTAL \$ <u>1,550</u>				<u>1,800</u>	<u>2,300</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>33</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

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2/8/2002	Mr. Angel Lopez [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Machinist Capitol Machine	\$50	\$100	\$150
2/8/2002	Mr. Nicholas Lu [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman Picvue Electronics Co.	\$100	\$100	\$100
2/5/2002	Ms. Cheryl MacDonald [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$150	\$200	\$350
2/8/2002	Mrs. Patricia MacDonald [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
1/31/2002	Mrs. Barbara MacIntosh [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assistant to VP Kawasaki Motors Corp	\$500	\$500	\$500
SUBTOTAL \$ <u>850</u>				<u>950</u>	<u>1,200</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>34</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

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2/13/2002	Mr. Lance MacLean [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrator UC Irvine	\$100	\$100	\$100
2/2/2002	Mr. Richard MacNair [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/8/2002	Mrs. Marilyn Macy-Green [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management Meadows Management	\$50	\$50	\$100
2/7/2002	Mr. Thomas Madigan [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$200	\$300
2/5/2002	Mr. John Maggiano [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$250	\$250	\$250
SUBTOTAL \$ <u>650</u>				<u>650</u>	<u>850</u>	

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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>35</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/25/2002	Mrs. Gloria Magidson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$150	\$150	\$250
1/29/2002	Mr. Thomas Malloy [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Trench Shoring Co.	\$100	\$100	\$200
2/5/2002	Mr. Charles Manger [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Saddleback Eye Center	\$1,000	\$1,000	\$1,000
1/25/2002	Mr. Peter Marshall [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$100	\$100	\$100
2/5/2002	Mrs. Georgia Martin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$150	\$250
SUBTOTAL \$ <u>1,450</u>				<u>1,500</u>	<u>1,800</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>36</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2002	Mr. James Martin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CFO Ponderosa Mobile Estates	\$100	\$100	\$200
1/29/2002	Ms. Ronnie Mason [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Self-Employed	\$100	\$100	\$200
2/5/2002	Mr. Jewel Mayer [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$50	\$100	\$150
2/5/2002	Mrs. Kathryn Mays [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$500	\$500	\$650
2/2/2002	Mr. & Mrs Norm & Virginia McAdoo [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Self-Employed	\$200	\$300	\$400
SUBTOTAL \$ <u>950</u>				<u>1,100</u>	<u>1,600</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
 from Jan. 20, 2002
 through Feb. 16, 2002

CALIFORNIA
FORM 460

Page 37 of 67

I.D. NUMBER
1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/25/2002	Mr. James McBride [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CPA Self-Employed	\$100	\$100	\$200
1/31/2002	Mrs. Eleanor McInnis [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/1/2002	Mr. James McWee [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$35	\$35	\$135
1/29/2002	Mr. Al Meisel [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$200	\$200
2/11/2002	Mr. Mark Mendizza [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Sage Communications	\$100	\$100	\$200
SUBTOTAL \$ <u>435</u>				<u>535</u>	<u>835</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period
 from Jan. 20, 2002
 through Feb. 16, 2002

CALIFORNIA
 FORM **460**

Page 38 of 67

NAME OF FILER

Norby for Supervisor

I.D. NUMBER

1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/25/2002	Mr. Campbell Michael [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dentist Self-Employed	\$500	\$500	\$500
1/29/2002	Ms. Linda Miley [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Regional Account Manager Glaxo Smith Kline	\$50	\$200	\$200
1/29/2002	Mr. David Milliken [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/2/2002	Mr. Cynthia Mirsky [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$350	\$650
2/13/2002	Mrs. Linda Moore [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$300	\$300	\$300
SUBTOTAL \$ <u>1,000</u>				<u>1,400</u>	<u>1,750</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>39</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/13/2002	Mrs. Roberta Muhleman [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Systems Analyst Lockheed Martin	\$200	\$200	\$200
1/25/2002	Mr. Steven Myers [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman & Ceo Steven Myers & Associates	\$1,000	\$1,000	\$1,000
1/21/2002	Mr. Mohit Nanda [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$900	\$900	\$1,000
2/6/2002	Mr. Richard Narver [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
1/29/2002	Mr. Crandall Norton [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500	\$500	\$1,000
SUBTOTAL \$ <u>2,700</u>				<u>2,700</u>	<u>3,400</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>40</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2002	Mr. James Osborn [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Executive Perigon	\$300	\$300	\$300
2/1/2002	Mr. Forrest Owen [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
1/29/2002	Mrs. Marion Paepke [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$100	\$150
1/31/2002	Mrs. Michelle Parker [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Account Executive New Century	\$250	\$250	\$550
2/4/2002	Mrs. Dolores Parsch [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corp Officer W.M. Parsch Co.	\$50	\$50	\$100
SUBTOTAL \$ <u>750</u>				<u>800</u> <u>1,300</u>		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>4</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/2/2002	Mrs. Virginia Patrick [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$150
2/13/2002	Mr. Steven Patz [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO K and S A.C.	\$150	\$150	\$150
1/25/2002	Mr. James Payne [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Payne & Fears LLP	\$1,000	\$1,000	\$1,000
2/10/2002	Mrs. Naomi Payne [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/11/2002	Mrs. Shirley Pemberton [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Shaklee Products	\$500	\$500	\$500
SUBTOTAL \$ <u>1,800</u>				<u>1,800</u>	<u>1,900</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>42</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/2/2002	Mrs. Nancy Petersen [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
1/29/2002	Mr. Robert Phillippy [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Newport Corporation	\$50	\$50	\$100
1/31/2002	Mr. Larry Phillips [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500	\$500	\$500
1/25/2002	Mrs. Candy Pieracci [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$50	\$50	\$150
2/13/2002	Mr. Allan Pilger [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Allan Pilger Telemarketing	\$100	\$100	\$100
SUBTOTAL \$ <u>800</u>				<u>800</u> <u>1,050</u>		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>43</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

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2/11/2002	Mr. Richard Plavetich [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Mercedes-Benz	\$150	\$150	\$150
1/25/2002	Mr. Lawrence Plon [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pharmacist UCI Medical Center	\$100	\$100	\$100
1/29/2002	Mrs. Julia Rappaport [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/5/2002	Mrs. Sheila Raymond [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$100	\$100
1/29/2002	Ms. Joanne Reid [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
SUBTOTAL \$ <u>500</u>				<u>500</u>	<u>500</u>	<u>650</u>

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>44</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

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2/2/2002	Mr. Charles Ritter [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$150	\$250
2/12/2002	Mr. Duane Roberts [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO ECG	\$1,000	\$1,000	\$1,000
1/29/2002	Mr. Howard Roob [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Medical Officer Manager Orange Coast Oncology	\$100	\$100	\$200
1/29/2002	Mr. Harry Rooney [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Self-Employed	\$100	\$100	\$200
2/6/2002	Mrs. Donna Ross [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investigator OC District Attorney	\$50	\$50	\$100
SUBTOTAL \$ <u>1,350</u>				<u>1,400</u>	<u>1,750</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>45</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

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2/6/2002	Mrs. Judith Rothrock [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Old Republic Title Co	\$100	\$150	\$175
1/29/2002	Ms. Lesley Rudolph [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/10/2002	Mr. Matthew Ruiz [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Interior Designer Self-Employed	\$100	\$100	\$200
2/12/2002	Mr. C.G. Russell [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/11/2002	Mrs. Marilyn Ruttencutter [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$200	\$200	\$200
SUBTOTAL \$ <u>550</u>				<u>600</u>	<u>775</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>46</u> of <u>67</u>
NAME OF FILER Norby for Supervisor		
		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/15/2002	Mr. Mark Sachar [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$100	\$100	\$100
1/29/2002	Mr. Frederick Sainick [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Sainick & Cote	\$50	\$100	\$200
1/22/2002	Mr. Gary Samaha [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP Sales Expanets	\$100	\$100	\$100
1/30/2002	Mr. Lee Sandler [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychiatrist Self-Employed	\$100	\$100	\$200
1/29/2002	Mr. John Santell [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Consultant Self-Employed	\$100	\$100	\$150
SUBTOTAL \$ <u>450</u>				<u>500</u>	<u>750</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>47</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2002	Mr. John Saunders [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor Saunders Property Company	\$250	\$250	\$250
1/31/2002	Mrs. Diana Schlesinger [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Schlesinger Financial	\$100	\$100	\$200
2/5/2002	Mr. Guy Schmidt [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/13/2002	Mr. Carl Schulthess [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant/Engineer Self-Employed	\$150	\$150	\$150
1/31/2002	Ms. Carol Schwab [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
SUBTOTAL \$ <u>650</u>				<u>650</u>	<u>800</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>48</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/16/2002	Mr. Alexander Scott [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$500	\$500	\$500
2/15/2002	Mrs. Monika Scott-Kerce [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor ReMax	\$100	\$100	\$100
2/15/2002	Mr. John Selecky [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Lifemasters	\$100	\$100	\$100
2/10/2002	Mr. Robert Shaw [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Berg Electric Corp	\$1,000	\$1,000	\$1,000
2/10/2002	Mr. Gary Sheker [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Helix Electric Company	\$1,000	\$1,000	\$1,000
SUBTOTAL \$ <u>2,700</u>				<u>2,700</u>	<u>2,700</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>49</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/31/2002	Mr. William Shields [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Consultant Self-Employed	\$100	\$100	\$100
2/12/2002	Mr. James Shively [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Boeing	\$200	\$300	\$600
1/28/2002	Mr. Ralph Simon [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$80	\$140
1/21/2002	Mr. Mahender Singh [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$1,000	\$1,000	\$1,000
1/29/2002	Mr. Bruce Smith [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
SUBTOTAL \$ <u>1,450</u>				<u>1,580</u>	<u>2,040</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>50</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/29/2002	Mrs. Velma Smith [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$200
2/1/2002	Mr. Richard Soden [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Transico	\$50	\$75	\$125
2/10/2002	Mrs. Pat Soderquist [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
1/29/2002	Mr. Hans Sommer [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
2/7/2002	Mr. Allan Songstad [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$1,000	\$1,000	\$1,000

SUBTOTAL \$ 1,350 1,375 1,525

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>51</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2002	Southern California Grading Co [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500	\$500	\$500
1/29/2002	Mr. Frank Spratt [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$35	\$70	\$105
1/31/2002	Mrs. Christine Steelman [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Secretary Action Electric Corp	\$100	\$100	\$200
2/5/2002	Mrs. Grace Steiner [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$150
1/24/2002	Ms. Julie Stevens [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Sales Stevens Realty Group	\$100	\$100	\$100
SUBTOTAL \$				835	870	1035

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>52</u> of <u>67</u>
NAME OF FILER Norby for Supervisor		
		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2002	Mr. David Stoddard [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Network Engineer Neo Logic Networks	\$50	\$50	\$100
1/25/2002	Mr. Harold Storch [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$150	\$200
2/12/2002	Mr. Steven Stratton [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Cabinet Maker Self-Employed	\$100	\$100	\$100
2/12/2002	Mr. Walter Straub [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Rainbow Tech	\$100	\$100	\$100
2/16/2002	Mrs. Sue Sutton [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Irvine Unified School District	\$25	\$50	\$100
SUBTOTAL \$ <u>375</u>				<u>450</u>	<u>600</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>53</u> of <u>67</u> I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

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2/2/2002	Mr. James Synold [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$200	\$400
1/24/2002	Mrs. Joanne Tarbell [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accounts Payable California Mortgage Services	\$1,000	\$1,000	\$1,000
1/29/2002	Mr. Troy Tate [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Counsel PRG Commercial	\$50	\$50	\$100
2/10/2002	Mr. Robert Thomas [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Trustee Horowitz Brothers Trust	\$1,000	\$1,000	\$1,000
2/5/2002	Mr. Gary Thompson [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mayor Pro-Tem City of Rancho Santa Margarita	\$100	\$100	\$100

SUBTOTAL \$ 2250 2250 2600

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>54</u> of <u>67</u> I.D. NUMBER 1237231

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1/25/2002	Mrs. Darlene Torrence [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Executive Fluor	\$300	\$300	\$550
1/24/2002	Mr. Chris Townsend [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Townsend Public Affairs	\$1,000	\$1,000	\$1,000
2/15/2002	Mr. Peter Travers [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Dow Chemical	\$100	\$100	\$100
2/13/2002	Mr. Ernest Treichler [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mech. Engineer Form Grind Corp	\$200	\$200	\$300
1/21/2002	Mr. Dan Trieber [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President Orange-Pacific Construction	\$1,000	\$1,000	\$1,000
SUBTOTAL \$ <u>2,400</u>				<u>2,400</u>	<u>2,400</u>	<u>2,950</u>

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>55</u> of <u>67</u> I.D. NUMBER <u>1237231</u>

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2/2/2002	Mr. Jeri Turpin [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	\$100
2/11/2002	Mr. Clark Valentine [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Valentine Design	\$200	\$200	\$200
2/15/2002	Mr. Jan Vandersloot [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$500	\$500	\$500
2/6/2002	Mr. Paul Vann [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Self-Employed	\$50	\$50	\$100
2/8/2002	Mr. Robert Vargo [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Capo Unified	\$100	\$150	\$300
SUBTOTAL \$ <u>900</u>				<u>950</u>	<u>1,200</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>56</u> of <u>67</u> I.D. NUMBER 1237231

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2/13/2002	Ms. Donna Varner [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PR Consultant Perception Public Relations	\$100	\$100	\$100
1/31/2002	Mr. Frank Villalobos [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	\$100	\$100	\$100
1/29/2002	Mr. Don Warren [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Librarian OC Public Library	\$100	\$150	\$250
1/29/2002	Mr. G.J. Wenck [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$250
2/3/2002	Mr. Peter Wetzel [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
SUBTOTAL \$ <u>500</u>				<u>500</u>	<u>800</u>	

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>57</u> of <u>67</u> I.D. NUMBER 1237231

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1/28/2002	Mr. Christopher Whiting [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Sound Matrix Co.	\$1,000	\$1,000	\$1,000
2/10/2002	Mrs. Olga Whiting [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000	\$1,000	\$1,000
1/24/2002	Van Cleave Family Trust [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000	\$1,000	\$1,000
1/22/2002	Ms. Wendy Whiting [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Oury School District	\$1,000	\$1,000	\$1,000
1/25/2002	Mr. David Wilkinson [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Prudential Real Estate	\$200	\$200	\$200
SUBTOTAL \$ <u>4,200</u>				<u>4,200</u>	<u>4,200</u>	

***Contributor Codes**

IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>	CALIFORNIA FORM 460
Page <u>58</u> of <u>67</u>	I.D. NUMBER 1237231

NAME OF FILER

Norby for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2002	Mr. Robert Wilks [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed	\$500	\$500	\$500
2/10/2002	Mr. Paul Willems [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Human Performance Institute	\$250	\$250	\$250
1/29/2002	Mrs. Carolyn Wilson [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrative Assistant Verizon Wireless	\$50	\$100	\$300
1/29/2002	Mr. John Windes [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$1,000	\$1,000	\$1,000
2/1/2002	Mr. Fred Wirth [REDACTED] [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$300
SUBTOTAL \$ <u>1,900</u>				<u>1,950</u>	<u>2,350</u>	

***Contributor Codes**

IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A (CONT)

Statement covers period from <u>Jan. 20, 2002</u> through <u>Feb. 16, 2002</u>		CALIFORNIA FORM 460 Page <u>59</u> of <u>67</u>
NAME OF FILER Norby for Supervisor		
		I.D. NUMBER 1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2002	Mrs. Shirley Wood [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bookkeeper Self-Employed	\$100	\$100	\$100
1/29/2002	Mrs. Annie Yong [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Exporter Self-Employed	\$100	\$300	\$300
2/1/2002	Mrs. Diane Zarins [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$100	\$300	\$500
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$ <u>300</u>				<u>700</u>	<u>900</u>	

*Contributor Codes

IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period
from 1/20/02
through 2/16/02

CALIFORNIA
FORM **460**

Page 60 of 67

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Norby for Supervisor

I.D. NUMBER
1237231

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10	Chris Norby [REDACTED] [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Brea High School	Office Space	\$2,000	—	3,000
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 2,000

Schedule C Summary

1. Amount received this period – nonmonetary contributions of \$100 or more.

(Include all Schedule C subtotals.) \$ 2,000

2. Amount received this period – unitemized nonmonetary contributions of less than \$100.....

\$ 0

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)..... TOTAL \$ 2,000

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>1/20/02</u> through <u>2/16/02</u>	CALIFORNIA FORM 460
Page <u>61</u> of <u>67</u>	I.D. NUMBER <u>1237231</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Norby for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Coalition for Senior Citizen Security [REDACTED]		State Mailer	1,448
Copy Right [REDACTED]		Printing	547
County of Orange [REDACTED]		Data	636

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 2,631

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ <u>117,295</u>
2. Unitemized payments made this period of under \$100	\$ <u>10</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>117,305</u>

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 1/20/02
through 2/16/02

CALIFORNIA
FORM **460**

Page 62 of 67

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Norby For Supervisor

I.D. NUMBER
1237231

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

OMP campaign paraphernalia/misc.
ONS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Our Voice Latino Voter Guide [REDACTED] [REDACTED]		Mailer	553 ⁻
Southern California County by County voter hand book [REDACTED] [REDACTED]		Slate Mailer	1,000 ⁻
Staples [REDACTED] [REDACTED]	OFC	Office Supplies	124 ⁻
US Postal Service	POS	Postage	15,720 ⁻
Voter Education Project [REDACTED] [REDACTED]		Slate Mailer	15,700 ⁻

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 33,097

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>1/20/02</u> through <u>2/16/02</u>		CALIFORNIA FORM 460
		Page <u>63</u> of <u>67</u>
		I.D. NUMBER <u>1237231</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Norby For Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
DMH & Associates [REDACTED]		Postage & Mailers	26,601 22,079
G Strahan & Associates [REDACTED]		Printing	12,723
Hang 'em High [REDACTED]		Signs	1,937
Hometown Voter Guide [REDACTED]		Slate Mailer	8,500
JART Direct Mail [REDACTED]		Printing & Postage	11,760

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 56,999

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>1/20/02</u>	through <u>2/16/02</u>	
Page <u>64</u> of <u>67</u>		I.D. NUMBER <u>1237231</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Norby for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<u>JC Evans Communications</u> [REDACTED]	<u>Lit</u>	<u>Graphic Design</u>	<u>860</u>
<u>Katrina Maas</u> [REDACTED]		<u>Fundraiser Services</u>	<u>5,000</u>
<u>Lewis Consulting Group</u> [REDACTED]	<u>CNS</u>	<u>Consulting</u>	<u>2,000</u>
<u>Max-Comm Technologies</u> [REDACTED]		<u>Phone Banks</u>	<u>2,550</u>
<u>Michael DiCostanzo</u> [REDACTED]	<u>PRO</u>	<u>Treasurer</u>	<u>250</u>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 10,660

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>1/20/02</u> through <u>2/16/02</u>		CALIFORNIA FORM 460
Page <u>65</u> of <u>67</u>		
NAME OF FILER <u>Norby For Supervisor</u>		I.D. NUMBER <u>1237231</u>

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Chris Jones [REDACTED] [REDACTED]			13,908

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 13,908

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>1/20/02</u> through <u>2/16/02</u>	CALIFORNIA FORM 460
Page <u>66</u> of <u>67</u>	I.D. NUMBER <u>1237231</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Voter Education Project [REDACTED]	State Mailer	0	31,400 -	15,700	15,700

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS \$ 0 \$ 31,400 \$ 15,700 \$ 15,700

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 31,400
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 15,700
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 15,700
May be a negative number

Schedule G**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period

from 1/26/02through 2/16/02

SCHEDULE G

CALIFORNIA
FORM**460**Page 67 of 67

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Norby for Supervisor

I.D. NUMBER

1237231

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Chris Jones**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
JC Evans Communications [REDACTED] [REDACTED]				9,159

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 9,159

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.